



The Colorado Health Foundation™

September 10, 2018

Marlene H. Dortch
Secretary
Federal Communications Commission
445 12th Street, SW
Washington, DC 20554

RE: Promoting Telehealth for Low-Income Consumers: “Connected Care Pilot Program” (WC Docket No. 18-213)

Dear Secretary Dortch,

Thank you for the opportunity to comment on the Federal Communications Commission’s (FCC) Notice of Inquiry (NOI) soliciting feedback on a pilot program to promote the use of broadband-enabled telehealth services among low-income families and veterans. The Colorado Health Foundation is the state’s largest private foundation and works to bring health in reach to all Coloradans. Our vision is that across Colorado each of us can say: “We have all we need to live healthy lives.” We work to achieve this vision by engaging closely with communities across the state through grantmaking, policy advocacy, and partnerships with the private sector.

We commend the FCC’s commitment to increasing digital opportunity for all Americans. As you note in the NOI, increased access to telehealth services is expanding access to high-quality health care independent of where patients are located. Continued expansion and wise investment in telemedicine has the potential to improve health outcomes and increase health equity. Per the request for comments and information, we have included suggestions and feedback below. We appreciate this important federal investment in telehealth and believe in its potential to increase access to high-quality health care, particularly for low-income families and those living in rural communities of our state.

Investing in Medicaid

In response to the inquiry regarding whether to focus funds on programs serving individuals insured by Medicaid, we support investing all or part of the Universal Service Funds (USF) in efforts that allow Medicaid programs to pilot effective programs. Such an investment has the potential to improve health outcomes for some of the most vulnerable populations in our country while also laying the foundation for improved Medicaid administration and lower costs in the future.

1780 Pennsylvania Street, Denver, CO 80203

P 303-953-3600 F 303-322-4576

www.coloradohealth.org



Focus on Public Health and Prevention in Addition to Disease Management

In addition to funding programs that utilize telehealth to manage and treat disease, we encourage you to also support programs that leverage telehealth to promote health and prevention. Such programs might be best run by public health departments or community-based nonprofits working in partnership with health care providers. As such, we encourage you to expand the entities eligible for funding to include public health agencies and non-profit service partners, in addition to health care providers.

In supporting a range of programs that effectively prevent, manage, and treat disease, we suggest prioritizing proposals that bring together Medicaid administrative entities, health care providers serving Medicaid clients, and public health experts in both the public and non-profit sectors. By prioritizing proposals that include all three of these entities (Medicaid, providers, and public health agencies), you can leverage the funding to support efforts that prevent disease, improve disease management, and lay the foundation for long term sustainability by supporting Medicaid's adoption of telehealth efforts at the state and local levels. Preventing disease and effectively managing it improves health outcomes and lowers costs. Given that this is a pilot, by engaging Medicaid, the investment can last longer than the three or five years that is funded by the pilot.


Addressing Inequities & Allow Communities to Define Their Needs

In terms of specific populations or demographic groups who would likely benefit from increased access to and use of broadband enabled telehealth services, we encourage the FCC to focus the pilot on communities experiencing health inequities. This varies by geographic area, and we suggest allowing applicants for funding to identify populations with greatest needs and significant potential for positive impact in their specific geographic area.

Areas of Focus

As noted in the NOI, telehealth can be helpful in a wide range of health arenas and can play a crucial role in creating a comprehensive, coordinated and continuous services that provide a seamless process of care. We support utilizing telehealth services that are culturally responsive and improve access to, and delivery of, mental and behavioral health care providers in areas where there is the greatest need.

Additionally, we urge the pilot to improve maternal health care, including access to prenatal care as well as access to lactation services to support breastfeeding. Telehealth is indeed well positioned to



support these services and they have been proven to positively impact maternal and child health, and should be treated as part of comprehensive primary care services for this pilot project.

As noted above, we urge you to allow the majority of health focus areas to be defined by the local communities themselves.

Population Served

We agree with your proposal to limit the participating health care providers' use of the pilot program funding to Medicaid-eligible patients, as well as veterans who qualify based on income for cost-free health care benefits through the Department of Veterans Affairs (VA). This will ensure the funding is invested to improve health for low-income individuals and will form a stronger foundation for Medicaid telehealth service delivery nationwide.

Measuring Patient Health Outcomes and Behaviors


We furthermore suggest including health outcome measures that align with public health and prevention, such as reduction in the incidence of disease. With respect to the application process and types of pilot projects to be supported, we recommend requiring applicants to submit information regarding how their efforts impact population health outcomes in addition to clinical outcomes at the individual patient level.

Program Structure & Duration

As mentioned above, we also recommend that a portion of the funding be invested in pilot programs that are run by public health agencies in partnership with health care providers, community-based nonprofits, and Medicaid staff. Telehealth has the potential to be utilized not solely to manage illness but also to prevent disease. By focusing a significant portion of the funding on prevention, the pilot can save even more taxpayer resources over the long term and help move the country towards improved health outcomes. By supporting programs that partner with state Medicaid agencies, the pilot can advance telehealth solutions that Medicaid can subsequently support longer term.

In terms of the duration of funding, we recommend that pilot programs be funded for a three to five-year period.

Based on new broadband efforts in Colorado, whereby local jurisdictions such as cities and counties are creating public utilities to compete in the marketplace as a telecommunications provider, we recommend that the pilot project focus some of its efforts on delivering new and innovative methods



of care, allowing for greater investment into the technological methods that can reduce wait times, and improve important outcomes.

Costs & Benefits

We support the proposal to utilize the funds to ensure that low-income Americans can realize the benefit of connected care everywhere models. The benefits of this include increasing equity in health outcomes; the costs potentially include investments in mobile technology including devices as well as subsidizing the cost of apps so that low-income persons can afford them. Staffing costs will also be required to help low-income communities learn about and adopt telehealth opportunities.

However, we are encouraged by the FCC's commitment to this pilot project because we believe that it can empower those who have not traditionally had needed services within reach in their communities and help to ensure the most vulnerable populations can live their healthiest lives.

We appreciate your consideration of these comments. If you have any questions, please do not hesitate to contact Jin Alexander Tsuchiya, public policy officer at the Colorado Health Foundation, at jtsuchiya@coloradohealth.org, or (303) 953-3667.

Thank you,



Kyle Legleiter
Senior Director of Policy
The Colorado Health Foundation